

Organization Certifications

- 1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.
- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.


Organization Signature

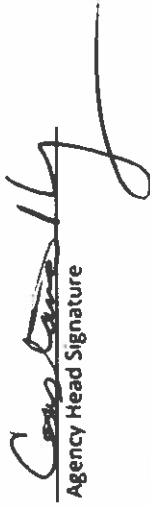
Executive Director
Title

Dawn Darby
Printed Name

10/16/2023
Date

Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2024.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2024.


Agency Head Signature

10-19-23
Date

Printed Name

Amended request

FOR WAYS AND MEANS INTERNAL RECORDS ONLY

House Member Appropriation Request Form

Member: Heather Bauer Date: 2/16/23

Project/Event Name*: The Therapy Place Expansion of Services and Facility
*Please make sure name is how you would like it listed in the budget

Requested Amount: 400,000

Recipient Entity: The Therapy Place

Is the final recipient a: state agency, local government, non-profit, or other?

If "other," please explain: _____

If a non-profit, is it registered and in good standing with the Secretary of State's Office? Yes or No

If no, please explain: _____

Recipient Entity Contact: Dawn Darby Title/Position: Executive Director / co-Founder

Contact Phone Number: 803-787-3033 Email: ddarby@thetherapyplace.org

Recipient Entity Website: thetherapyplace.org

Summary of Intended Use of the Funds: Funds to increase square footage to serve demand

Please attach a requested project cost breakdown and any supporting materials or documents. Are there any materials submitted with this form? Yes or No

Justification of Request/Public Benefit: Due to demand of their therapies, they have outgrown current space and desperately need financial support to continue to serve South Carolinians

To be completed by House members only

Heather Bauer
Primary Member Sponsor - Please Print

Heather Bauer 2/16/23
Member Sponsor Signature & Date

Additional Sponsors: Beth Bernstein

Amount Recommended by House Member: 400,000



The Therapy Place Request for Support
Total Request: \$400,000

TOTAL PROJECT COST:	\$725,000
1,358 square foot addition	\$475,000
Furniture, equipment and supplies to outfit new classroom & therapy spaces	\$100,000
Increased Program Budget	\$150,000
South Carolina State Request	\$400,000

Background

The Therapy Place is a non-profit, pediatric therapy and educational clinic providing life-changing therapies so that each child, regardless of his or her geography or financial status, will have every opportunity to reach his full potential. The Therapy Place provides physical, occupational and speech therapies for children with developmental delays, the only therapeutic preschool in the central part of SC, as well as wrap-around family support. We have provided these services for 12 years in a 7,500 square foot building that has been renovated and reconfigured in every way possible to maximize the number of children we can safely accommodate. We serve children with mild to severe developmental delays, with diagnoses ranging from the very common to the extremely rare.

Since our inception, we have served 895 children with more than 83,000 therapy visits, many of whom have been with us the entire time, continuing to receive services to reach their goals. As you will see in our annual report for FY22:

- 186 children with 47 named diagnoses received services
- 9,422 therapy visits were provided by 12 therapists
- 91% of the children we serve qualify for Medicaid due to their disability and/or poverty status.

Our ***Bridges Therapeutic Preschool*** serves children ages three to six with developmental delays. In August of 2023, through this construction project, we are adding a second Bridges preschool classroom to move children off of our waiting list.

The Therapy Place ***family support programs*** include support groups (parent and sibling), field trips, respite events, educational workshops and social opportunities for the parents with built-in childcare and meals. Parents support one another and learn about “special needs” topics and

resources in an environment where they know their children are taken care of by trained adults.

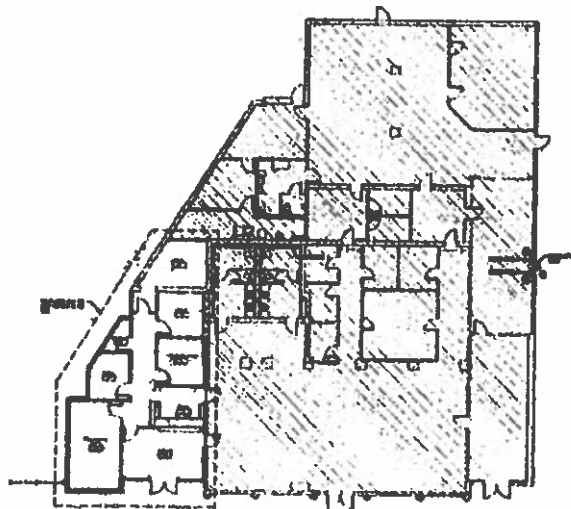
We provide therapy services to children traveling from over 30 zip codes and 10 counties throughout South Carolina. In addition, being the only facility to provide the innovative therapy – TheraSuit Method – in North or South Carolina, we also provide this service to families from out of state.

The time has come, due to overcrowding and a sizable waiting list, to add on to the existing structure, increasing our space by another 1,300 square feet.

The state investment will provide:

- New family & community gathering room to be used for support groups, workshops, meetings with families, therapists, and teachers, and more
- Dedicated space for the TheraSuit Method intensive program
- 2nd therapeutic preschool classroom to move children from the waiting list
- Additional therapy rooms to move children from the therapy waiting list
- New and improved family waiting room
- New evaluation room for initial intake of child/family for services

Addition of 1,358 square feet represented by area in dotted line below:



We seek this funding to expand our impact and assistance to South Carolina families of children with disabilities. The remainder of the funds will be sought from federal, county, and local sources to include corporate and community support.

South Carolina
Secretary of State
(<https://sos.sc.gov/>)
Mark Hammond

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The Therapy Place, Inc.

Public Id: P15537


Mrs. Dawn Darby , CEO

3620 COVENANT RD

COLUMBIA, SC 29204-4216

Status: Registered. Information from this organization's annual financial report is listed below.

The following financial information has been provided to the Secretary of State's Office by the above named organization. The Secretary of State's Office has not independently verified this financial information. If a charity has recently registered with the Secretary of State's Office for the first time, there may not be any financial data available. Below are figures for the organization's fiscal year **7/1/2021 - 6/30/2022**.

Financial Report	
TOTAL REVENUE:	\$1,417,353.00
PROGRAM EXPENSES:	\$1,080,874.00
TOTAL EXPENSES:	\$1,250,587.00
NET ASSETS:	\$513,938.00
FUNDRAISER COSTS:	\$69,887.00
Financial Report File	
	2022 TTP 990 June 30.pdf (/DisplayFinancialReport.aspx? ReportType=Charity&CopyID=157534)
Next Report: 07/01/2022 - 06/30/2023 Due Date: 11/15/2023	

According to the financial information filed with this office, this organization devoted **86.4%** of its total expenses to program services during the year reported.

Disclaimer: The South Carolina Secretary of State's Charities Search Webpage is provided as a service to customers to research charitable organizations on file with our office, or that have been the subject of an administrative action. Users are advised that the Secretary of State, the State of South Carolina, or any agency, office, or employee of the State of South Carolina do not guarantee the accuracy, reliability, or timeliness of the information provided, as it is the responsibility of the charity to inform the Secretary of State of any updated information. Furthermore, the information provided does not constitute legal advice.

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South Carolina Department of Disabilities & Special Needs
Special Grant Award for Pass-Through State Contributions

Provider Name: The Therapy Place **Vendor Number:** 7000159761
Grant Name: The Therapy Place Expansion **Funds Reservation #:** _____
Grant Number: _____
Grant Period: 7/1/2023 though 6/30/2024 **Amount:** \$400,000.00

Disbursement request in accordance with Proviso 117.21 and 118.19 of the FY2023-24 Appropriation.


Amount: \$400,000.00
General Ledger Code: 5180750000
DDSN Funded Program: 4424.360000X000

Fund Code	Cost Center	Functional Area	G/L Account
10050024	J160Q50010	j160X36TP	5180750000

FINANCIAL SERVICES DIVISION
717-463-3333

Payment Approved by: 

Date: 10/20/2023

 10/23/23